COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

| TYPE OF DECLARATION |
|--|
| This declaration is of the following type: (check one applicable Item below) |
| Kar original |
| design . |
| supplemental |
| NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continua- tion-in-part application do not check next Item; check appropriate one of last three Items. |
| national stage of PCT |
| NOTE: If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR CIP. |
| divisional |
| continuation |
| continuation-in-part (CIP) |
| INVENTORSHIP IDENTIFICATION |
| WARNING: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted. |
| My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: |
| THERMAL CYCLER FOR AUTOMATIC PERFORMANCE OF THE POLYMERAS |
| CHAIN REACTION WITH CLOSE TEMPERATURE CONTROL |
| SPECIFICATION IDENTIFICATION |
| the specification of which: (complete (a), (b) or (c)) |
| (a) is attached hereto. |
| (b) was filed on as Serial No. 0 / or Express Mail No., as Serial No. not yet known (if applicable). |
| NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67. |
| (Declaration and Power of Attorney [1-1]—page 1 of 4) |

| (c) 🔲 ' | was | described | and | claimed filed | | PCT | Internation | nal Applic | | No. |
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POWER OF ATTORNEY

| As a n | amed invent | or, I hereby | appoin | t the follo | owing a | attomey | (s) an | d/or agent(| s) to p | 7050- |
|-----------|----------------|--------------|----------|-------------|---------|---------|--------|-------------|---------|--------------|
| cute this | application | and transac | t all b | usiness | in the | Patent | and ' | Trademark | Office | con- |
| nected th | nerewith. (Lis | st name and | registra | ation nun | nber) | | | | | |

Edwin T. Grimes (Reg. No. 20,800)
Charles W. Bradley (Reg. No. 17,855)
William J. Hone (Reg. No. 26,739)
Richard P. Ferrara (Reg. No. 30,632)

(check the following item, if applicable)

Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

William J. Hone
Davis Hoxie Faithfull & Hapgood
45 Rockefeller Plaza
New York, New York 10111

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

(212) 757-2200

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

| Full name of sole or | first inventor | John | Girdner | Atwood * |
|----------------------|-------------------|--------------|------------|-------------------|
| Inventor's signature | | | | |
| Date | | Country of C | v.s. | |
| Residence Wes | t Redding | CT | | |
| Post Office Address | 145 Limek | iln Roa | d, West | Redding, CT 06896 |
| | | | | |
| Full name of second | i joint inventor, | if any | lbert Ca | armelo Mossa |
| Inventor's signature | | | | |
| Date | | Country of C | itizenship | D.S. |
| PateTrum | bull, CT | | | |
| Post Office Address | 15 Oxen E | ill Roa | d, Trum | oull, CT. 06611 |
| | | | | |

(Declaration and Power of Attorney [1-1]—page 3 of 4)

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

| | Signature for third and subsequent joint inventors. Number of pages acceding |
|---|--|
| | Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added |
| | Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added |
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| 啓 | Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (CIP) application. |
| | Number of pages added |
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| Ш | Authorization of attorney(s) to accept and follow instructions from representative |
| | • • • |
| | If no further pages form a part of this Declaration then end this Declara- |
| | tion with this page and check the following item This declaration ends with this page |
| | - |

ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR SIGNATURE BY THIRD AND SUBSEQUENT INVENTORS Lisa May Goven Full name of third joint invent r, if any Inventor's signature Bridgeport, CT Country of Citizenship Date __ U.S. Residence 535 Vincelette Street, Unit #8 Post Office Address Bridgeport, CT. 06606 Full name of fourth joint inventor, if any ___ Fenton Williams Inventor's signature _ Date ____ U.S. _ Country of Citizenship Residence Brookfield, CT 72 Stony Hill Village, Brookfield, CT. Post Office Address Full name of fifth joint inventor, if any _ Timothy M. Woudenberg Inventor's signature U.S. Date __ Country of Citizenship Bethel, CT. Residence _ Post Office Address 26 Whitlock Avenue, Bethel, CT. 06801

ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR SIGNATURE BY THIRD AND SUBSEQUENT INVENTORS sixth Full name of WHAT joint invent r, if any __Marcel Margoulies_ Inventor's signature ___ Country of Citizenship Date ___ Scarsdale, NY Residence 27 Farragut Road, Scarsdale, NY 10583 Post Office Address _ Full name of Recompoint inventor, if any ____ Robert P. Ragusa_ Inventor's signature . Date _____ __ Country of Citizenship U.S. Residence Newton CT Post Office Address 3 Wiley Lane, Newton, CT. 06470 eighth Full name of Whik joint inventor, if any ____ Richard Leath_ Inventor's signature __ v.s. _ Country of Citizenship Date _____ Residence Berkley, CA.

Post Office Address 1136 The Alameda, Berkley, CA. 94707

| ninth Full name of shind joint inventor, if any | Clive Miles |
|---|--------------------------------------|
| Inventor's signature | C-Miles |
| Date 4/16/92 Count | try of Citizenship <u>U.S.</u> |
| Besidence San Raphael, CA. | • |
| Post Office Address 89 Blacksto | one Drive, San Raphael, CA. 94903 |
| | |
| | |
| | try of Citizenship |
| Residence | |
| Post Office Address | |
| Full name of fifth joint inventor, if any | |
| Inventor's signature | |
| DateCount | ry of Citizenship |
| Residence | |
| Post Office Address | |

ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL CONTINUATION OR CIP APPLICATION

(complete this part only if this is a divisional, continuation or CIP application)

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S) UNDER 35 U.S.C. 120

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose that a paragraph of Title 35, United States Code of Federal Regulations, § 1.56(z) which so available and between the filing date of the prior application(s) and the national or PCT international filing date of this application.

*to the Office all information known to me to be material to patentability

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| PCT APPLI- CATION NO. | PCT FIL DATE | ING | U.S. SERIAL NOS. ASSIGNED (if any) | | | |
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COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR CIP)

| As a below | named | inventor, | i hereb | y dec | lare that: |
|------------|-------|-----------|---------|-------|------------|
|------------|-------|-----------|---------|-------|------------|

| As a below named inventor, I hereby declare that: |
|---|
| TYPE OF DECLARATION |
| This declaration is of the following type: (check one applicable item below) |
| KX original |
| design . |
| supplemental |
| NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continua- tion-in-part application do <u>not</u> check next item; check appropriate one of last three Items. |
| national stage of PCT |
| NOTE: If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR CIP. |
| divisional |
| continuation |
| continuation-in-part (CIP) |
| INVENTORSHIP IDENTIFICATION |
| WARNING: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted. |
| My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: |
| TITLE OF INVENTION THERMAL CYCLER FOR AUTOMATIC PERFORMANCE OF THE POLYMERASE CHAIN REACTION WITH CLOSE TEMPERATURE CONTROL |
| SPECIFICATION IDENTIFICATION |
| the specification of which: (complete (a), (b) or (c)) |
| (a) [is attached hereto. |
| (b) was filed on April 20, 1992 as X Serial No. 07 / 871, 264 |
| or Express Mail No., as Serial No. not yet known |
| and was amended on (if applicable). NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are |
| not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67. |
| (Declaration and Power of Attorney [1-1]—page 1 of 4) |

| (c) | was | described | and | claimed | | | Internation | nal Applic | ation No. |
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(Declaration and Power of Attorney [1-1]—page 2 of 4)

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Edwin T. Grimes (Reg. No. 20,800) Charles W. Bradley (Reg. No. 17,855) William J. Hone (Reg. No. 26,739) Richard P. Ferrara (Reg. No. 30,632)

(check the following item, if applicable)

Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

William J. Hone
Davis Hoxie Faithfull & Hapgood
45 Rockefeller Plaza

New York, New York 10111

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

(212) 757-2200

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

| Full name of sole of first inventor John Girdner Atwood |
|---|
| Inventor's signature |
| Date 5/8/92 Country of Citizenship U.S. |
| Residence West Redding, CT |
| Post Office Address 145 Limekiln Road, West Redding, CT 06896 |
| |
| Full name of second joint inventor if any, Albert Carmelo Mossa |
| Inventor's signature |
| Date 5/8/92 Country of Citizenship U.S. |
| Residence Trumbull, CT |
| Post Office Address 15 Oxen Hill Road, Trumbull, CT. 06611 |
| Post Office Address . |

(Declaration and Power of Attorney [1-1]-page 3 f 4)

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

| K) | Signature for third and subsequent joint inventors. Number f pages added |
|------------|---|
| | Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. <i>Number of pages added</i> |
| | Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added |
| | • • • |
| | Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (CIP) application. |
| | Number of pages added |
| | • • • |
| | Authorization of attorney(s) to accept and follow instructions from representative |
| | • • • • • • • • • • • • • • • • • • • |
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| | If no further pages form a part of this Declaration then end this Declara- tion with this page and check the following item |
| | ☐ This declaration ends with this page |

| Full name of third join | t inventor, if any Lisa May Goven |
|----------------------------|---|
| Inventor's signature | |
| - F/9/92 | Country of Citizenship U.S. |
| Date <u>S787 IA</u> Bri | dgeport, CT U.S. |
| | |
| Post Office Address | 535 Vincelette Street, Unit #8 |
| | Bridgeport, CT. 06606 |
| • | markan williams |
| Full name of fourth jo | oint inventor, if any Fenton Williams |
| Inventor's signature | Deston Williams |
| Date5/8/9 | Country of Citizenship U.S. |
| Basidones Broo | kfield, CT |
| Post Office Address | 72 Stony Hill Village, Brookfield, CT. |
| Post Office Address | 06804 |
| | |
| Full name of fifth join | nt inventor, if any Timothy M. Woudenberg |
| Inventor's signature | Si Child |
| - E/R/47 | Country of Citizenship U.S. |
| Re | thel, CT. |
| Hesidence | |
| Post Office Address | 26 Whitlock Avenue, Bethel, CT, 06801 |
| | |

| sixth Full nam of #Hips joint inventor, if any // Marcel Margonlies |
|---|
| Inventor's signature |
| DateCountry of Crizenship U.S. |
| Residence 27 Farragut Road, Scarsdale, NY 10583 |
| Full name of Research Joint inventor, if any Robert P. Ragusa Inventor's signature Arked & Magazine |
| DateCountry of Citizenship |
| Residence Newton, CT. |
| Post Office Address 3 Wiley Lane, Newton, CT. 06470 |
| |
| eighth Full name of NMK joint inventor, if any <u>Richard Leath</u> |
| Inventor's signature |
| Date Country of Citizenship U.S. |
| Residence Berkley, CA. |
| Post Office Address 1136 The Alameda, Berkley, CA. 94707 |
| |

| Inventor's signature | nt inventor, if any Clive Mil s | |
|---------------------------------------|--|-----|
| Date | Country of Citizenship | |
| Residence San | Raphael, CA. | |
| Post Office Address | 89 Blackstone Drive, San Raphael, 94903 | CA. |
| • | pint inventor, if any | |
| · · · · · · · · · · · · · · · · · · · | Country of Citizenship | |
| | | |
| Post Office Address | | |
| | فننتهم | |
| Full name of fifth join | at inventor, if any | |
| Inventor's signature | <u> </u> | |
| Date | Country of Citizenship | |
| Date | · | |
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ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CIP APPLICATION

(complete this part only if this is a divisional, continuation or CIP application)

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S) UNDER 35 U.S.C. 120

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose taste. Minimizerostient as defined in Title 37, Code of Federal Regulations, § 1.56(2) which see became available garred between the filing date of the prior application(s) and the national or PCT international filing date of this application.

*to the Office all information known to me to be material to patentability

| | | | NS OR PCT INTERN U.S. FOR BENEFIT | | | ONS |
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COMBINED DECLARATION AND POWER OF ATTORNEY

| COMBINED DECLARATION AND POWER OF ATTORNEY |
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| (ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR CIP) |
| As a below named inventor, I hereby declare that: |
| TYPE OF DECLARATION |
| This declaration is of the following type: (check one applicable item below) |
| xx original |
| design |
| supplemental |
| NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continua- tion-in-part application do not check next item; check appropriate one of last three items. |
| national stage of PCT |
| NOTE: If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL, CONTINUATION OR CIP. |
| divisional divisional |
| continuation |
| continuation-in-part (CIP) |
| INVENTORSHIP IDENTIFICATION |
| WARNING: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted. |
| My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: |
| TITLE OF INVENTION THERMAL CYCLER FOR AUTOMATIC PERFORMANCE OF THE POLYMERAS |
| CHAIN REACTION WITH CLOSE TEMPERATURE CONTROL |
| SPECIFICATION IDENTIFICATION |
| the specification of which: (complete (a), (b) or (c)) |
| (a) Li is attached hereto. |
| (b) was filed on <u>April 20, 1992</u> as Serial No. 07 / 871.264 |
| or Express Mail No., as Serial No. not yet known and was amended on (if applicable). |
| NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. |

(Declaration and Power of Attorney [1-1]—page 1 of 4)

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(Declaration and Power of Attorney [1-1]—page 2 of 4)

POWER OF ATTORNEY

| As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to pros | }0 - |
|---|-----------------|
| cute this application and transact all business in the Patent and Trademark Office co |)N- |
| nected therewith. (List name and registration number) | |

Edwin T. Grimes (Reg. No. 20,800) Charles W. Bradley William J. Hone (Reg. No. 26,739) Richard P. Ferrara (Reg. No. 30,632)

(check the following item, if applicable)

Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

William J. Hone

Davis Hoxie Faithfull & Hapgood

(212) 757-2200

45 Rockefeller Plaza New York, New York 10111

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

| Full name of s | sole or | first in | ventor | Jo | ohn Gi | rdner | Atwood | |
|----------------|---------|----------|----------|--------|-----------|---------|-----------|----------|
| Inventor's sig | nature | | | | | | | |
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| Residence . | t Red | ding | CT | | | | | |
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| Full name of | second | joint is | nventor, | if any | Alb | ert C | armelo Mo | ssa |
| Inventor's sig | | | | | | | | |
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(Declaration and Power of Attorney [1-1]—page 3 of 4)

CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

| E | Signature for third and subsequent joint inventors. Number 1 pages doed |
|----------|---|
| | Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. <i>Number of pages added</i> |
| | Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added |
| | • • • |
| | Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (CIP) application. |
| | Number of pages added |
| | • • • |
| | Authorization of attorney(s) to accept and follow instructions from representative |
| | • • • |
| | |
| | If no further pages form a part of this Declaration then end this Declara- tion with this page and check the following item |
| | ☐ This declaration ends with this page |

| Full nam | f third join | nt inventor, if any | Lisa May | Goven |
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| | intinv nt r, if any <u>Marcel Margoulies</u> | | | | | | | |
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ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR DIVISIONAL, CONTINUATION OR CIP APPLICATION

(complete this part only if this is a divisional, continuation or CIP application)

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S) UNDER 35 U.S.C. 120

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose tester paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose tester paragraph of Title 37, Code of Federal Regulations, § 1.56(z) which see available tested between the filing date of the prior application(s) and the national or PCT international filing date of this application.

*to the Office all information known to me to be material to patentability

| PRIOR DE | U.S. APPL | ICATIO | NS OR PCT INTERN U.S. FOR BENEFIT | ATIONAL A UNDER 35 | PPLICATION USC 120: | ONS |
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| U.S. APPLICATIONS | | | | Status (Check one) | | |
| U.S. APPLICATIONS 1.0 / 620,606 | | U.S. FILING DATE 11/29/90 | | Patented | Pending X | Abandoned |
| 2.0 / 670,545 | | 3/14/91 | | | x | |
| 3.0 / PCT APPLICATIONS DESIGNATING THE U.S. | | | | | | |
| PCT APPLI- CATION NO. | PCT FILING DATE | | U.S. SERIAL NOS. ASSIGNED (if any) | | | |
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